

## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718818

1. Entity Name

HOLIDAY GARDENS CIVIC ASSOCIATION, INC.

Principal Place of Business

5131 VICTORIA LANE  
HOLIDAY FL 34690  
US

Mailing Address

5131 VICTORIA LANE  
HOLIDAY FL 34690  
US

2. Principal Place of Business

5152 Victoria Lane

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

5152 Victoria Lane

Suite, Apt. #, etc.

City &amp; State

Holiday FL

Zip

34690

US

Country

34690

US

City &amp; State

Holiday, FL

Zip

34690

Country

US

4. FEI Number

59-2875204

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CARLSON, BEA  
5131 VICTORIA LANE  
HOLIDAY FL 34690

7. Name and Address of New Registered Agent

Name Alice Brandt

Street Address (P.O. Box Number is Not Acceptable)

5317 Tammy Lane

City Holiday

FL 34690

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Alice Brandt - Alice Brandt President

4-24-01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.259. Election Campaign Financing  
Trust Fund Contribution. \$5.00 May Be  
Added to FeesMake Check Payable to  
Department of State

## 10. OFFICERS AND DIRECTORS

## 11.

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|                                                |                                                                   |                                            |                                                |                                                                   |                                                                              |
|------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------|------------------------------------------------|-------------------------------------------------------------------|------------------------------------------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P<br>CARLSON, BEA<br>5131 VICTORIA LN<br>HOLIDAY FL 34690         | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | President<br>Alice Brandt<br>5317 Tammy Lane<br>Holiday, FL 34690 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>CARLSON, HARRY<br>5238 NANCY LANE<br>HOLIDAY FL 34690        | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Director<br>Bea Carlson<br>5238 Victoria Ln.<br>Holiday FL 34690  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>COLEMAN, JIM<br>5034 VICTORIA LANE<br>HOLIDAY FL 34690       | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Catherine Potter<br>5039 Juiceln.<br>Holiday Ft 34690             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>BRANDT, ALICE<br>5317 TAMMY LANE<br>HOLIDAY FL 34690        | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP<br>Rick Taylor<br>5152 Victoria Ln.<br>Holiday, FL 34690       | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>LAPP, PEGGY<br>5311 TAMMY LANE<br>HOLIDAY FL 34690           | <input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Norman Chambo<br>5138 Victoria Ln<br>Holiday, FL 34690            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>NADEALE, PATRICIA<br>2222 PRESTIGE DRIVE<br>HOLIDAY FL 34690 | <input type="checkbox"/> Delete            | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Patricia Nadeau<br>2222 Prestige Dr.<br>Holiday, FL 34690         | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alice Brandt 4-24-01 (727)942-3511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

4-24-01